CONSTRUCTION OF AN EDUCATIONAL BOOKLET ON PREVENTION OF SEXUALLY TRANSMITTED INFECTIONS IN THE ELDERLY

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Abstract

Introduction: The rates of contamination from sexually transmitted infections in the elderly have been increasing. Knowing that sexuality in the third age is little approached, there is need to create educational technologies as a strategy to assist this specific audience. Objective: To building an educational booklet on prevention of sexually transmitted infections in the elderly. Methodology: This is a methodological research related to the construction of an educational technology in the booklet modality. The research was carried out from August to December 2016. The following precepts of Echer (2005) were adopted: bibliographical survey and elaboration of educational material. Initially, in the bibliographic survey, the manuals of the Ministry of Health related to sexually transmitted infections were analyzed. Subsequently, an integrative review was performed at the Medline and Lilacs databases. The preparation of the booklet followed the steps recommended by Moreira, Nóbrega and Silva (2003), regarding language, illustrations, layout and design. Result: The booklet titled "Better conscious age. STI, I DO NOT want it!" was structured to address key information on the prevention of sexually transmitted infections in the elderly. In relation to the content, the following topics were extracted from the selected literature: etiology, signs and symptoms and mode of prevention. In its context, information with clear and objective language was used. It consisted of 21 pages, divided into nine domains with illustrations and information pertinent to the content. Conclusion: This material may aid in the awareness of the elderly population about healthy and protected sexual practice.

Keywords: Sexually Transmitted Infections, Health Education, Elderly Health, Sexuality, Nursing.

1 INTRODUCTION

The population is aging gradually. In 2012, there were 19.6 elderly (60 years or older) for each adult in active age (15 to 59 years), with an estimate to reach 63.2 in 2060[1]. Linked to the situation of the aging population, there have been many behavioral changes in the sexuality of the elderly.

Sexuality in the third age is a complex subject, for it is a taboo target, because it is a reserved subject and has a series of meanings. The sexual practice between men and women in the process of aging is little discussed and, sometimes, even ignored by health professionals and by social class; however, discussing the topic of sexuality in old age is a major challenge for bringing up real issues related to the sexual practice of the elder[2].

Currently, a high number of notifications of new cases of Sexually Transmitted Infections (STI) in the third age due to the growth of the elderly population in Brazil was detected.

STIs are caused by more than 30 etiological agents, mainly transmitted from one person to another by sexual contact and, eventually, by blood. Transmission may still occur, resulting from an STI, from the mother to the child during gestation, delivery or breastfeeding[3].

In this context, in nursing, the theoretical knowledge bases on different levels of knowledge, which makes it a challenging and complex profession. However, it is of the utmost importance that professionals perform the work in a harmonious and synchronized way, because the team performance is essential to achieve the objective of the assistance, which is to bring knowledge to reduce the existing taboos on this topic.
Nursing, as a science, uses the creation of technologies as a strategy to assist its clientele and promote actions of independence and autonomy [4]. Technology is used to make previously unlikely tasks easier, in addition to developing and sharing knowledge [4].

Thus, the process of booklet elaboration bases on the principles of educational-dialogical practice applied to health pedagogy based on the Freirian theory. This method contributes to help the client in the modification of his/her lifestyle, becoming the agent of transformation, thus amplifying the understanding about the imbroglio and reflecting on the reality surrounding him/her [5].

Given this background, the question is: Is the creation of an educational booklet a tool in the prevention/control of Sexually Transmitted Infections in the elderly?

The relevance of the research bases on the fact that the creation of a booklet for the prevention/control of Sexually Transmitted Infections in the elderly aims to promote information on prevention of STIs in elders by encouraging them to appropriate the subject as well as creating subsidies for their pleasure, without contamination, focusing on the playfulness and attractive. Thus, the objective of the present study is to construct an educational booklet on prevention of sexually transmitted infections in the elderly.

2 METHODOLOGY

This is a methodological research related to the construction of an educational technology in the booklet modality. In order to ensure the excellence of the quality of the preparation of this educational material, precepts have been adopted, which elucidate the steps for the elaboration of didactic materials for health care [6].

The process of constructing educational materials involves the following steps: submitting the project to the research ethics committee; bibliographic survey; preparation of educational material and, finally, qualification or validation by specialists in the subject and representatives of the target audience. The present study used only two steps, searching the articles and stages of the booklet construction [6].

In the literature review, a search for articles and literature was carried out in the databases of the scientific literature Medline and Lilacs and the Ministry of Health related to the topic of sexually transmitted infections in the elderly: etiology, signs and symptoms, prevention mode.

In order to obtain the objective of the present study, the research method consisted of an integrative review, using the following steps: identification of the problem or theme (elaboration of the guiding question, establishment of descriptors and inclusion/exclusion criteria of articles); sampling (selection of articles); categorization of studies; definition of the information to be extracted from the reviewed studies; analysis and discussion of the used/developed technologies; synthesis of the knowledge evidenced in the analyzed articles or presentation of the integrative review [7].

The following guiding question was established: "What are the guidelines on sexually transmitted infections passed on to the elderly?"

The present study adopted as inclusion criteria: publication on the subject of sexually transmitted infections in the elderly; prevention or the perception of the elderly about STIs; electronically available, complete and free of charge; original article; in Portuguese; publications from the last six years (more recent evidence). Duplicate publications were excluded, as well as studies that did not address topics relevant to the review objective. The search used the terminology in health suggested by the Descriptors in Health Sciences (DeCS), which identified the following descriptors: elders and sexually transmitted infections, with the following crossing: elders and sexually transmitted infections.

The search took place in September 2016, resulting in 1,222 references in both databases. Of these, 1,216 did not meet the inclusion criteria, resulting in a final sample of six articles. There was also a search in the manuals of the Ministry of Health seeking information needed to construct the booklet.

The elaboration of the booklet regarding language, illustration, layout and design, followed the steps recommended by previously study [8].

3 RESULT AND DISCUSSION

The constructed booklet was titled "Better conscious age. STI, I DO NOT want it!", addressing in its content the prevention of sexually transmitted infections in the elderly, in order to stimulate the
playfulness and the orientation of the elderly population on this subject. Thus, two steps were taken to elaborate the booklet: bibliographical survey and construction of the Booklet.

The first step in the booklet-building process was the bibliographical survey, in which, in view of the search, the decision was to follow only the most recent manual titled "Manual of Control of Sexually Transmitted Diseases STD" (2006) [9] and the "Clinical Protocol and Therapeutic Guidelines Sexually Transmitted Infections" (2015), [3] since they present the latest recommendations of the Ministry of Health.

From this manual, aspects relevant to the construction of the booklet were approached, such as disease, etiologic agent, signs and symptoms and prevention of each disease.

Therefore, this survey was extremely important since health professionals follow the guidelines passed by the Ministry of Health, and use them to provide qualified, standardized and humanized care.

After this analysis, an integrative review was carried out on the subject in the MEDLINE and LILACS databases, totaling six articles in the final sample.

This review allowed observing that elders have knowledge about sexually transmitted diseases and their vulnerability, but they have a gap in the knowledge about the signs and symptoms. Therefore, in light of the above, the booklet needs to address this aspect[10,11,12].

When the theme is sexuality and old age, some problems appear, such as lack of dialogue between professional and patient; and the deficiency in the way of prevention and the means used, such as the importance of using condoms. The researchers point out that the elders themselves, society and health professionals have prejudices, causing a taboo related to sex in the elderly, which hinders establishing preventive measures in this population[13,14].

It is necessary to create public policies that can stimulate the promotion of sexual health by means of educational actions, stimulating the role of educador in the health professional in the form of intervention aimed at the prevention of STDs[10, 11, 12, 13, 14].

This integrative review allowed glimpsing the scientific evidence about the guidelines passed on to elders about STDs, identifying gaps addressed in the educational booklet.

In this second stage of construction of the booklet, the text was initially elaborated, followed by the booklet content.

**Text elaboration**

The choice was the elaboration of texts rich in content, but written in a clear and objective way, in order to become an attractive material and with better understanding, providing the dynamism and learning differentiated by the target audience.

An accessible and culturally relevant language is imperative for the success of the educational material, in order to provide the readers with the autonomy and discernment to understand that their actions directly influence their health, aiming to improve the quality of life avoiding risks and harms[8].

Language should also be clear, concise and objective, being consistent with the target audience, since language outside cultural standards, with technical terms and complex words negatively influence the success of educational technology.

Educational materials should address the readers' needs with a culturally appropriate, easily understandable language, allowing the public to understand the messages. It also reinforces the relevance of the quality of the material focusing on information indispensable for the beneficiaries [8].

A research that approached the adolescents' perception on the use of educational materials regarding a healthy diet showed that educational materials should be creative, colorful and with few texts in order not to tire readers and attract the public [15].

Based on the results of the bibliographic survey, texts were written in a clear and objective way so that it was accessible to all clients.

**Making the Booklet**

For this stage, a drawing specialist was consulted for the making of the figures, in order to become an attractive and better understandable material.
In order to prepare the booklet, the steps recommended by previously study were followed [8].

The booklet titled "Better conscious age. STI, I DO NOT WANT it!" was structured to address key information on the prevention of sexually transmitted infections. Its context used information with clear and objective language. It consists of 24 pages with illustrations and information relevant to the content.

The information contained in the material aims to clarify doubts about sexually transmitted infections as well as ways of prevention.

The booklet was divided into eight domains, described below:

1. **Presentation**: It addressed sexuality in the elderly, the incidence of HIV/AIDS and other STIs, as well as the importance of prevention.

2. **Condomlin**: This session presents the educational object, created to make the presentation of the booklet dynamic, providing a greater interaction with the readers.

3. **Do You Know What Sexually Transmitted Infections Are?**: In this area, sexually transmitted infections are conceptualized.

4. **STIs manifest through a series of signs and symptoms. Therefore, it is important to be alert to identify them**: At this moment, the booklet alerts on the signs and symptoms of STIs.
   - **Urethral discharge**: It clarifies at this moment the STIs that cause urethral discharge, the type of the etiological agent and the signs and symptoms.
   - **Vaginal discharge**: It clarifies for the elderly the STIs that cause vaginal discharge, the type of etiologic agent and the signs and symptoms.
   - **STIs that cause wounds (ulcers)**: It explains which STIs cause wounds, the type of etiological agent and the signs and symptoms.
   - **STI that causes bubo**: It clarifies for the elderly the STI that causes bubo, the type of etiological agent and the signs and symptoms.
   - **HIV/AIDS**: Clarifications on HIV and AIDS and the forms of contamination.
   - **Hepatitis B**: It explains what the disease is, what the etiological agent is, and the signs and symptoms.

5. **Detection of STIs**: Advice for the elders to seek a qualified professional in a health unit to perform vaginal inspection and serological tests.

6. **Main prevention**: It ratifies that the main form of prevention is through the use of the female or male condom.

7. **Correct way to use the condom**: Explanation of how to use condoms correctly.

8. **In order to fix what you have learned, how about having fun with this crossword! Here we go! I will give you some tips. You can do this!:** At this moment, a crossword is presented to stimulate the elders to fix the contents of the booklet in a fun way.

9. **Write your doubts**: Space destined for annotations of the elders about curiosities and doubts.

For this booklet, one decided to present to the reader one idea at a time to facilitate the understanding, avoiding the use of technical terms and jargons, simplifying the content and leaving only necessary information.

It used simple and short texts as well as limited illustrations to avoid overloading the material; the illustrations were consistent with the target audience and content of the material.

**Educational Technology - Booklet**

Health education is of great value for health care, appearing as an important means of disseminating knowledge that sharpens skills and promotes awareness so that the behavior changes in favor of health. In this context, there are educational technologies that favor the learning process in a creative and stimulating way. These, in addition to reducing difficulties in nursing practice, facilitate the dissemination of information causing empowerment and autonomy with regard to the patients’ self-care.
The use of educational materials is capable of promoting satisfactory results in health promotion. These teaching materials corroborate as facilitating tools for educational practice. This practice is often a monotonous and methodical process, discouraging both who passes the information, and who receives it, indicating the need to use educational technologies as a facilitator in teaching[16]

The educational booklets can act as a means of communication to promote health, since they provide vast benefits, beyond the just transmission of information to the subjects. Therefore, it is an important way to acquire new knowledge[17].

The number of studies showing favorable results in nursing with the use of these educational technologies is increasing. The nurse is a professional that conciliates education and health in the scope of teaching/learning, thus, many researches have being developed in the technological scenario, focusing on the greater adhesion, of not only users of the service, but also of the professionals themselves and students in the context of a better health.

A research that constructed and validated an educational booklet for prevention of vertical HIV transmission showed that this technology helped to standardize the guidelines related to prevention of vertical HIV transmission, facilitated communication between professionals and patients, and also managed to influence the autonomy and empowerment of the addressed public [18].

Thus, it is possible to observe the importance of creating technologies to support health education with the purpose of disseminating information in a clear, objective and dynamic way, aiming at a better adhesion to the information, favoring the autonomy and empowerment of the subjects.

4 CONCLUSION

The development of the booklet on prevention of sexually transmitted infections in the elderly is about expanding the subject and raising the awareness of the population in question to healthy and protected sexual practice. The use of these technologies corroborates as facilitating tools for the educational practice, making the learning process dynamic.

The construction of educational booklets is an important action in health care, since this catalytic tool helps the nurse, as a health promoter, to disseminate information in a clear, objective and creative way.

Therefore, the use of educational materials such as booklets in the elder's sexual health becomes relevant and necessary to transmit information and to break taboos, since the elders, the population and health professional little discuss this subject. The professional performance is extremely important regarding this clinical practice, since the technologies do not replace them, but rather assist them in a qualified care.

REFERENCES


